## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)	
Defenders of Willdife Action Fund	
Full Name (Last, First, Middle Initial) of Payee	Date
Whole Foods	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	
5815 Wyoming Blvd NE	Amount
City State Zip Code	18.81
Albuquerue NM 87109	
Purpose of Expenditure Category/	Office Sought: House State:
supplies Type	Presidential Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
BARACK OBAMA	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary X General
for Office Sought 37.61	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	l pui
Wild Bunch Consulting	Date
Mailing Address	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
900 19th St NW, Suite 400	Amount
City State Zip Code	6971.54
City State Zip Code Washington DC 20006	
Purpose of Expenditure	Office Sought: X House State: NM
TV ad production  Category/ Type	House Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 01
Martin HEINRICH	Check One: X Support Oppose
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought 6971.54	2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Wild Bunch Consulting	Date
	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address 900 19th St NW, Suite 400	Amount
,	8622.49
City State Zip Code Washington DC 20006	
Burnaga of Evnanditura	Office Sought: House Chate
TV ad production  Category/ Type	Presidential Senate State:
Name of Federal Candidate Supported or Opposed by Expenditure:	Presidential Sende District:
JOHN S. MCCAIN	Check One: Support X Oppose
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought 15594.03	2008
TOI Office Sought	Other (specify)
(a) CURTOTAL (Unwined below a deat Francisco	15612.84
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTALof Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	